

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.L.P.E. CLASSIFIER		43	2/27/61
FORMALITY REVIEW	03-42	420	03-12-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ _____ Rejected N _____ Non-elected
+ _____ Allowed I _____ Interference
(Through numeral) _____ Canceled A _____ Appeal
+ _____ Restricted O _____ Objected

Claim	Date
1	1/1/61
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If more than 150 claims or 10 actions
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